Idaho Medicare Advantage and Cost Prescription Drug Plans

*The beneficiary drug premium covers prescription drugs only. Medicare Advantage plans also cover Medicare medical and hospital benefits, and supplemental benefits. Plan premiums vary for these benefits. Beneficiaries generally are responsible for the Part B premium.

Includes contracts/plans approved as of September 25, 2005. The data does not reflect information for Plans offering Part B only services, some demonstrations, PACE organizations, employer sponsored plans, or plans that were not approved by the "As of" date of the chart.

| | | | | Type of Medicare Advantage Plan | | | | | Drug Deductible | | | Includes Tiered | Type of Additional Coverage Offered in Coverage Gap | | | Number of |
|---------------------------------------|--|---------------------------------|-----------|------------------------------------|-------|-----------------|---------|-------|-----------------|---------|---------|--------------------|---|--------------|------------------|-----------|
| | | Percent Beneficiaries | | | | | Private | | | | | Copay- | | | Mail | Top 100 |
| Oiti No | Diam Name | with Access to Plan in State | | | Local | Regional PPO | | Cost | 7 | | | ments for | Generics Only | Generics and | Order Offered | Drugs on |
| Organization Name | Plan Name | | Premium * | нмо | PPO | PPU | Service | Plans | Zero | Reduced | (\$250) | Drugs | Only | Brands | Offered | Formulary |
| Blue Cross of Idaho | True Blue | 36% | \$32.59 | • | | | | | | | • | • | | | | 88 |
| | True Blue | 6% | \$32.59 | • | | | | | | | • | • | | | | 88 |
| | True Blue | 14% | \$32.59 | • | | | | | | | • | • | | | | 88 |
| Blue Cross Of Idaho Hlth Services Inc | Secure Blue | 14% | \$32.59 | | • | | | | | | • | • | | | | 88 |
| | Secure Blue | 43% | \$32.59 | | • | | | | | | • | • | | | | 88 |
| Humana Insurance Company | Humana Gold Choice PFFS H1804-022 | 60% | \$0.00 | | | | • | | • | | | • | | | • | 97 |
| | Humana Gold Choice PFFS H1804-149 | 40% | \$12.19 | | | | • | | | | • | | | | • | 97 |
| | Humana Gold Choice PFFS H1804-066 | 40% | \$20.10 | | | | • | | • | | | • | | | • | 97 |
| Regence BlueShield Of Idaho | Basic Drug | 55% | \$17.40 | | • | | | | | | • | • | | | • | 96 |
| United Healthcare Insurance Company | UnitedHealthcare MedicareComp Essential Rx | 32% | \$0.00 | | | | • | | • | | | • | | | • | 96 |
| | UnitedHealthcare Medicare Comp Choice Rx | 31% | \$0.00 | | • | | | | • | | | • | | | • | 96 |
| | UnitedHealthcareMedicare CompChoicePlusRx | 31% | \$17.64 | | • | | | | • | | | • | | | • | 96 |